

Ben Bramston  
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**Psychological Report**

11/06/2019

Ms. Sarah Jane Loftus  
C/o: Catherine Murphy  
Bligh Park Community Centre Inc.  
PO Box 5711  
South Windsor NSW 2756

Referral: Sarah Jane Loftus  
D.O.B. 08/07/1971

Dear Mrs. Murphy

Thank you for your referral for an adaptive functional assessment of Sarah Loftus, to investigate whether Sarah has an intellectual disability. This initial assessment involved a Vineland-3 comprehensive parent interview with Mrs. Marlene Loftus, and a psychosocial interview assessment with Sarah on 17 April 2019. A Vineland-3 carer form was completed by you on 30 April 2019.

As a guide, this assessment is informed by the Social Security Services schedule for assessment of an intellectual impairment for Disability Support Pension. I hereby reference the legislative document "Social Security (Tables for the Assessment of Work-related Impairment for Disability Support Pension)", F2011L02716., Table 5 – Mental Health Function. The social security document indicates, for consideration, an adaptive functional assessment and cognitive test must be conducted to verify an intellectual disability.

**Personal History**

Sarah lives on her own, and is a mother to her two adult aged daughters, and a grandmother to her grandsons aged 5 and 2 years of age. Sarah is reported to occasionally be responsible for babysitting for her 2year old grandson.

Sarah described a recent experience of feeling traumatised after she had found her mother's next door neighbour deceased at home. She reported to try to revive her neighbour while awaiting an ambulance to arrive. However, her mother said Sarah attempted to resuscitate the woman for several minutes, but had not realised the woman had expired several hours prior. Sarah said this experience often revisits her as intrusive, and recurrent thoughts of the event, causing her distress and to often disturb her ability to sleep at night.

**Education and Early Development**

When Sarah was 3 years of age, her parents had separated, which Sarah's mother described as emotionally distressing for Sarah. In kindergarten, Sarah was identified to have

an unspecified learning difficulty, and was enrolled in a school for specific purposes (SSP), a NSW Education supported learning school for children with intellectual and physical disabilities. Sarah is reported to have attended the school briefly before her mother withdrew her and re-enrolled Sarah in a mainstream school amidst concerns for Sarah's emotional wellbeing.

Throughout Sarah's primary schooling and high school years Sarah had frequently moved between her mother's home in Sydney and her father in Victoria during her childhood. Sarah's mother said these disruptive transitions had often occurred when Sarah refused to live with either parent. Moving between her parents' homes is reported to have had a negative impact on Sarah, starting when she was 8 years old. Sarah suggested she had experiences of trauma possibly indicative of undisclosed childhood complex trauma at that time. When Sarah was 16 years old she returned to live with her mother in Sydney, her mother reports prior to this Sarah had a suspected aborted pregnancy whilst living with her father.

Sarah's mother said Sarah is embarrassed about her poor reading ability, especially when her 5-year-old grandson said he helps his grandmother by reading her mail to her, because she cannot read it herself. Sarah's mother described Sarah to be illiterate. During the assessment interview, Sarah had demonstrated that she can write her name very slowly with limited dexterity, which was legible, however she added a forgotten letter of her middle name, and could not accurately remember her mobile number; needing to write two different versions and remained unsure which was correct. When asked to write a simple sentence, she could not do so.

### **Interpersonal Relationships**

Sarah's volunteer manager commented that Sarah has related experiences of domestic violence, in most of her intimate relationships with men. Sarah's mother reported Sarah's first de-facto relationship was stable, however her second relationship in her thirties, she had her two children, and was diagnosed with PTSD, reported to be related to alleged physical and psychological abuse by her partner. Sarah's mother had also substantiated this to be accurate.

Sarah's mother said Sarah has had four relationships during her adult life; having first married at the age of 37, and to have divorced her first husband shortly there-after. Sarah is reported to have married her second husband at the age of 44 years, and to have divorced him two years later, due to alleged domestic violence against her. Sarah and her mother said a court case against her ex-husband, for these assaults against her, is awaiting completion. Sarah disclosed that her second ex-husband had attempted to douse her with petrol and set her on fire. Sarah said she feels very anxious about the court hearing, and she fears that her ex-husband continues to visit her home.

Sarah's mother reported Sarah does not socialise with friends, nor does she build and maintain long standing friendships. She is described as more reclusive than social, and does not have a capacity to arrange, plan and go out to meet, and socialise with her peers. Sarah is reported by both interviewed informants to live a simple routine life, contained by activities she can manage her daily basic needs. Unexpected changes to these simple routines, such as unexpected visitors at her volunteer workplace, unsettles Sarah, making her very anxious and avoidant of new people.

### **Personal Self-Sufficiency**

Sarah's mother and volunteer manager report they have observed Sarah cannot read or write, and she becomes very anxious when routines change. Mrs Murphy said Sarah often has difficulties choosing clothing to wear, often wearing winter cloths on hot days or not enough clothing on cooler days. According to her mother, Sarah regularly forgets to pay her utility bills or to buy groceries, however she is able to purchase items to cook basic meals comprising a single meat protein and a vegetable. Sarah's mother said Sarah frequently had problems with domestic chores, such as keeping the home clean and cooking meals, throughout each of her adult relationships and marriages.

Sarah describes herself as anxious; she said most days she fears leaving her home on her own because of her experiences of domestic violence whilst living with her last ex-husband. Sarah said she excessively worries that he is nearby and believes he still visits her home at night. Sarah said she avoids opening her mail, when she suspects it is from the courts about her court appearance, and she often avoids opening her utility bills. Sarah said when she cares for her grandsons; she is able to make basic meals such as sandwiches for them.

### **Employment**

Sarah is reported to have had three employment roles during her adult life. Her first job was with a domestic cleaning company for 3 years; in which Sarah had been terminated for making several mistakes due to her inability to read cleaning product labels. Later in her early thirties, Sarah is reported to have worked for a biscuit manufacturer, and to have had significant problems sustaining her concentration as a production line worker. Sarah's last employment was as a sandwich hand; where she sustained a hand injury when she forgot to use a protective bar, slicing her fingers open, and required medical treatment.

Sarah is reported to now work as a volunteer at the Bligh Park community centre, under the supervision of her volunteer manager, Catherine Murphy. Her manager reports Sarah has difficulties with moderately simple tasks, and tends to forget three step instructions. Sarah is reported to be unable to complete task without supervision. Mrs Murphy further elaborated that Sarah lacks foresight or initiative to plan to complete tasks. Sarah requires reminding to complete multiple steps such as setting up tables and chairs for a morning tea for visitors to the centre.

### **Medical History**

As a young child, Sarah reported learning problems led Sarah's to have speech, sight, and hearing assessments. Sarah was diagnosed with amblyopia of the right eye; a condition inherently linked to underdevelopment of her visual brain centres. Sarah's mother reports Sarah underwent a corrective treatment called occlusion therapy for her visual deficit.

Sarah reports that she is currently prescribed the medications Seroquel 225mg for a diagnosis of Major Depressive Disorder and Post-traumatic Stress Disorder. Sarah reports to also be diagnosed with sleep apnoea and to experience broken sleep most nights. A detailed medical history, from Sarah's GP, was not available for the purpose of this assessment.

**Psychological Assessment****Vineland Adaptive Behaviour Scales, Third Edition (Vineland-3)**

The Vineland Adaptive Behaviour Scales, Third Edition (Vineland-3) is a measure of a person's daily activities, typically required for personal and social sufficiency. It is measured in comparison to the typical performance expected of the assessed person compared with their peers of the same age. The assessment scale comprises four domains, representing distinct dimensions of adaptive functioning. Sarah's mother, Mrs Marlene Loftus was interviewed utilising a domain-level interview form on the 12 April 2019. Sarah's community volunteer manager, Mrs Catherine Murphy completed a Vineland comprehensive carer/guardian form on the 30 April 2019.

The results indicate that Sarah's level of general adaptive functioning, as observed by her mother and Volunteer Manager, is estimated to be in the Low range. Sarah's assessment results are included below:

Domain	Parent	Employer
	ADAPTIVE LEVEL	
<b>Communication</b> – Attending, understanding, and responding appropriately. Using words and sentences to express oneself verbally. Using reading and writing skills.	Low <1 <sup>st</sup> Percentile	Low <1 <sup>st</sup> Percentile
<b>Daily Living Skills</b> – self-sufficiency in eating, dressing, washing, hygiene and healthcare. Performing household tasks. Functioning in the world outside of the house, including safety, money, travel, and rights and responsibilities. Meeting expectations for appropriate behaviour within the school environment.	Low <1 <sup>st</sup> Percentile	Moderately Low 4 <sup>th</sup> Percentile
<b>Socialization</b> – responding and relating to others. Engaging in play and fun activities. Demonstrating behavioural and emotional control in different situations involving others.	Low <1 <sup>st</sup> Percentile	Low <1 <sup>st</sup> Percentile
<b>Adaptive Composite</b> - A comprehensive estimate of the child's overall level of personal and social sufficiency.	Low <1 <sup>st</sup> Percentile	Low <1 <sup>st</sup> Percentile

<b>Adaptive Levels:</b>				
Low	Moderately Low	Adequate	Moderately High	High

**Formulation**

At an early developmental age Sarah experienced the loss of her father when her parents had divorced. Her mother remarked, Sarah often blamed herself throughout her childhood for her father leaving them. Sarah's reported experiences of her parents' divorce was a significant attachment loss for her, at a time when she also started Kindergarten. Sarah's early education teachers noticed she had learning difficulties, and Sarah was enrolled in a SSP school for a reported intellectual deficit impacting on her learning. Despite this, her mother had her removed her to re-join mainstream classes, where she continued to struggle to acquire essential early literacy skills.

In Sarah's third year of primary school, she is reported to have displayed disturbed, and externalising behaviour problems at school, which had further disrupted her learning. At the age of 8 years old she chose to live with her father; as her mother reported Sarah's behaviour at home had also become unmanageable. As an adolescent, Sarah returned to live with her mother after a suspected aborted pregnancy and enrolled at a Sydney high school and displayed emotional and behaviour problems at school.

In adulthood Sarah had left school without completing her school certificate, and had worked uncomplicated jobs with little success. Sarah is described by her mother as being impressionable and impulsive in her choice of male companions. Her mother said aside from her first relationship, her two short marriages had been abusive. As her mother reported, Sarah has always had difficulties appraising people and making safe interpersonal decisions for herself that had contributed to her endured experiences of physical abuse and trauma as an adult.

According to her mother, and volunteer manager's answers on the Vineland-3, Sarah displays deficits in reasoning, problem solving, planning and judgement that have associations with poor abstract thinking and working memory impairments. This is likely the cause of an early childhood developmental delay, which was later exacerbated by an attachment childhood trauma during her first three years of school. These factors both had significantly disturbed Sarah's emotional wellbeing, and had also impaired her acquisition of phonological reading and literacy skills throughout her childhood.

### **Summary and Interpretation**

In summation, Sarah's assessed adaptive functioning, based on reports of her early developmental life course, and her primary school educator's observations reported by Sarah's mother, Sarah had displayed early childhood developmental deficits in childhood and adolescence. Sarah's current assessed adaptive functioning is in the low range and has a likely association with a low estimate of intellectual abilities, similar to a person her age with a mild intellectual disability. This estimate is based upon Sarah's Vineland-3 scores, and indicated by the Vineland-3 Manual, Table 7.6 (Sparrow, Cicchetti & Saulnier, 2016), in comparison to matched control groups of persons greater than 19 years old with a FSIQ range of 50-70.

### **Recommendations**

1. Sarah requires further assessment to verify the adaptive functioning results, indicating a possible mild intellectual disability. A cognitive assessment utilising a Wechsler Adult Intelligence Scale, Fourth Edition (WAIS-IV) would provide a meaningful measure and estimate of Sarah's intellectual abilities.
2. An assessment to better define if Sarah's has a specific learning disability, would involve a complete a battery of achievement tests, such as the Wechsler Individual Achievement Test, Third Edition (WIAT-III), to specifically rule out a specific learning disorder.

End of Report

Authored by,



Ben Bramston

Registered Psychologist  
PSY0001756866

cc: Mrs. Catherine Murphy, Ms. Sarah Loftus

## APPENDIX

The purpose of this information page is to provide evidence of eligibility for an intellectual disability for Centrelink.

The data below is to only be interpreted by a practitioner with minimum qualification of General Registration as a psychologist.

Name: Sarah Jane Loftus	DOB: 08/07/1971
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The following results on formal assessment of adaptive functioning:

ADAPTIVE				
TEST/S	DOMAINS/CLUSTERS	DESCRIPTIVE RANGE	95% CONFIDENCE INTERVAL	PERCENTILE
Vineland-3	Total ABC (Parent)	Low	19-25	<1
	Communication	Low	16-24	<1
DATE/S	Daily Living	Low	21-31	<1
17/04/2019	Socialisation	Low	16-24	<1
30/04/2019				
CHRONOLOGICAL AGE/S	Total ABC (Carer/Employment)	Low	52-56	<1
52:8	Communication	Low	39 - 51	<1
	Daily Living skills	Moderately Low	70 - 78	4
	Socialisation	Low	43 - 51	<1

Note: Vineland-3 ABC score is considered a reliable estimate and predictor of a person's cognitive ability.

Signed: Ben Bramston  
Date: 10/6/2019

Name: Ben Bramston Registration: PSY0001756866  
General Registered Psychologist

These results may be shared with NDIS and other relevant organisations to establish eligibility for events for students with an intellectual disability.

Parent / Client name \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Referral for Sarah Loftus DOB 8/7/1971**

To Whom It May Concern:

I am writing this on behalf of a client that I am seeing at the moment who is the victim of domestic violence in two past relationships.

Sarah has been seeing me on a weekly basis for a number of months. She was referred to me by the Manager at Bligh Park Community Services, to help Sarah and discuss with her the many issues pertaining to the domestic violence and hardships she has faced from a very young age.

Sarah is the victim of child sexual abuse by a relative over many years starting at the age of 6. Sarah had a very difficult teenage and adult life and was in very violent, mental and physically abusive relationships. She managed to break free from her first marriage of over 10 years of horrendous violence where Sarah lost some of her front teeth after being dragged down a flight of concrete stairs by the hair and face first.

Sarah then started a new relationship with a man who was a drug addict and after an argument he deliberately doused Sarah in petrol and set her alight. She was able to survive with minor injuries however the brutality of the attack has caused Sarah to have many adverse reactions and feelings about others in general.

Sarah was at first very apprehensive to sit and discuss what has happened to her and to her credit she has been ready and willing to share more and more each time we meet. There are a lot of things that Sarah has had to overcome and many that still need to be dealt with, thankfully she is no longer in a relationship and has focused on being a mother and grandmother.

I am committed to helping Sarah in the process of recovery from her many trials and tribulations.

Sarah is ready and willing to meet, to bring her police reports and AVO's against her two past partners and confirms she has no relationship with either any longer.

If you require further information or wish to discuss please contact me on 0426 282 214 and thank you for the wonderful and much needed work you do.

Sarah needs all the help she can get.

Warm Regards,

**Mrs. Maria Sarina M.A.C.A**

**Counsellor/Founder Friendship Centre**

**Bachelor of Arts (Social Psychology/Social Research) UWS**

**Member of SASP - Society of Australasian Social Psychologists**

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ST JOHN OF GOD

Richmond Hospital

**DR ANJIAH MADUGULA**  
**MB BS, MD, FRANZCP**  
**Provider No: 480002HW**

Date: 16/6/2021

**MEDICAL CENTRE**

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To  
The National Disability Insurance Scheme

RE: SARAH JANE LOFTUS (DOB: 08/07/1971)

Thank you for assisting Sarah with a National Disability Insurance Package.

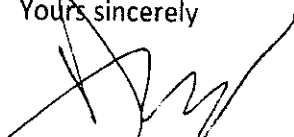
Sarah was referred by Dr Janaki Sureshwaran for a psychiatric assessment to the Medical Centre at St John of God Hospital Richmond. She has been under my regular follow-up since 3rd March 2021. I have reviewed Sarah this morning and corroborated with her mother, Mrs Marlene Loftus.

I noted that Sarah has a long history of mental health issues, including complex trauma. She suffers from intellectual impairment and dyslexia. Sarah attends special education classes and left school in grade seven as she could not cope with the academic stress. Unfortunately, Sarah endured childhood sexual abuse, and she was a victim of rape. Reportedly Sarah was treated for depression and PTSD over the past several years.

Sarah has little social skills and needs assistance in daily living. Sarah has limited capabilities in communication skills, socialisation, learning abilities and self-management. I understand Dr Janaki Sureshwaran have completed an application for the NDIS package to Sarah. I support Sarah application for the NDIS package.

Please feel free to contact our clinic if you need any further information.

Yours sincerely



Dr Anjaiah Madugula

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